

UNITED STATES PROBATION OFFICE  
EASTERN DISTRICT OF PENNSYLVANIA

NOTICE OF REQUEST FOR MODIFICATION OF SUPERVISION CONDITIONS

TO: **Robert Lynn, Jr.**  
(Name)

CASE NO. **2:04CR00011-001**

This is to notify you that the U.S. Probation Office intends to make a formal request to the Court that the conditions of supervision be modified as follows:

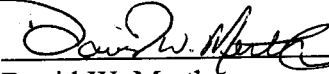
The defendant shall participate in a mental health treatment program which may include urine testing at the direction and discretion of the probation officer.

The reason for this modification and addendum to the conditions of supervision is:

On January 16, 2006, you were evaluated by Olin Fox, M.D., at Pyramid Healthcare Bellville. Doctor Fox diagnosed you as suffering from bipolar disorder, mixed. Doctor Fox prescribed Depakote and Wellbutrin.

You are advised that you have the right to a hearing before the Court on the modification of the conditions of supervision, and that you have the right to be represented by counsel at such hearing. You also have the right to waive (give up) such a hearing. You are hereby asked to acknowledge receipt of the "Notice" by signing the applicable portion on the reverse side of this form and returning the form to your Probation Officer. If you desire a hearing, you should sign the ACKNOWLEDGMENT AND REQUEST FOR HEARING portion of the form. If you wish to waive (give up) a hearing, you should sign the ACKNOWLEDGMENT AND WAIVER portion of the form. If you request a hearing, you will be notified by this office of the time and place thereof in due course.

Daniel W. Blahusch, Chief  
U.S. Probation Officer

  
David W. Merth      2-15-06  
U.S. Probation Officer      Date

DWM

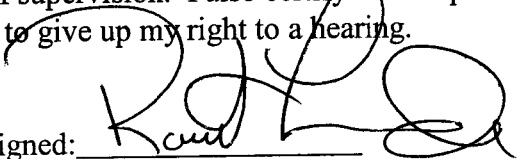
ACKNOWLEDGMENT AND REQUEST FOR HEARING

I, , hereby acknowledge receipt of the Notice of Request for Modification of the Conditions of Supervision, and request a hearing thereon with my reasons stated below:

Signed: \_\_\_\_\_  
(Date)

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ACKNOWLEDGMENT AND WAIVER OF HEARING

I, , hereby acknowledge receipt of the Notice of Request for Modification of the Conditions of Supervision. I have read the Notice and understand that I have the right to a hearing before the Court on that request and to the assistance of counsel at the hearing. However, I hereby waive (give up) my right to a hearing and agree to the proposed modifications of conditions of supervision. I also certify that no promises have been made to me in order to induce me to give up my right to a hearing.

Signed:   
(Date)

2/15/06.

WITNESS:

David Marth  
Name

400 Washington St. Reading, PA  
Address